

THE
BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XXX.

WEDNESDAY, JULY 17, 1844.

No. 24.

STATE LEGISLATION RESPECTING MEDICAL PRACTICE.

[This subject—always an interesting one—has of late, from various causes, received increased attention. Many of the States in our Union, which have long had enactments conferring a license upon the educated physician, have within a few years, as is well known, repealed them. The opinions of medical men on the subject in such places, as well as the practical results of this new state of things, are matters of interest to their professional brethren in other parts of the country. We have already copied the doings of the Monroe Co. (N. Y.) Medical Society in regard to the late change of the law in that State, and we now give the report of a committee of the Medical Society of Albany Co., which is ably drawn up, and which was unanimously adopted at a late meeting of the Society.]

For the purpose of laying the whole subject before the Society, in an intelligible form, we present the following summary of the laws regulating the practice of medicine as they existed in this State previous to May 6, 1844.

County and State Medical Societies were incorporated, and the terms of admission into the County Societies were prescribed by law. Members of the County Societies were the only licensed practitioners of physic and surgery.

All unlicensed persons, except "botanic doctors," were prohibited from practising under penalty of \$25 for each offence. All unlicensed persons, without exception, were made incapable of enforcing, by legal process, the payment of compensation for services rendered to the sick.

By the act of May 6, 1844, all unlicensed persons are freed from the penalty for practising, and the disability of collecting pay for their services. Besides this, they are made liable to civil and criminal prosecutions for malpractice, gross ignorance and immoral conduct. Previous to the passage of this act, the law prescribed the mode of becoming a licensed practitioner of medicine, and conferred on such, and on the botanic doctors, the exclusive right to practise. Since the passage of this act, the law still prescribes the mode of becoming a licensed practitioner, but gives to all persons of whatever age, or sex, or education, the right to practise, and to enforce the payment of compensation for their services. Hence, although the organization of the County and State Societies is left

as before, it is no longer obligatory on those who practise physic and surgery to become members of the County Societies, nor to go through the course of study and the examination requisite for admission into these societies. They have become voluntary associations, which give to their members the title of licensed practitioners, but confer on them no legal rights. Such is the operation of this act on the laws regulating medical practice.

We now proceed to the examination of the question, whether the passage of this act calls for any movement on the part of the Society. But first of all, it will be necessary to review the course of legislation in regard to medical practice, and to establish the principles on which such legislation ought to be founded.

Seeing what important duties devolve upon the physician, what weighty interests are confided to his skill and integrity, subject to no control but his own conscience, legislators have always recognized the propriety and necessity of providing men to assume those duties who could offer some guarantees of capacity and honesty, and of guarding the public against imposition by the ignorant and unprincipled. Hence laws have been enacted, having in view the two-fold object of raising up and organizing a body of competent physicians, and of protecting the public against imposition.

To accomplish the former of these objects, the profession has been organized by the establishment of County Societies, so that its members may readily be recognized by each other and by the public, may exercise a general supervision over each other, and co-operate to promote the common welfare.

Provision has been made for medical education by the establishment of schools liberally endowed, in which students may, at moderate expense, be taught the science and art of medicine. A course of study has been prescribed, through which candidates are required to pass before they can be admitted to an examination by which their qualifications are to be tested. After having accomplished this course of study and passed the examination, the student is admitted into the profession as one worthy of its honors and fitted to assume its duties.

Thus are attained the first great objects of medical legislation. A body of physicians is created, presenting certain guarantees of capacity and character, and this body is organized so that its members may be readily recognized by the public. These objects and the means by which they are attained we all unite in commending. If any person, with these means of choosing, applies for medical aid to one who can offer no guarantees of proper qualifications, he is guilty of a gross imprudence; but it is at his own risk, and he has to suffer in his own person all the consequences. The law has protected him against imposition, but not against a foolish choice.

It might be supposed, that when men have the choice before them of educated physicians, presenting evidences of their qualifications, and of others whose main titles seem to be their ignorance and impudence, they would not hesitate to have recourse to the former. But sad experience

being true, We find that men who conduct all their other affairs with prudence and discretion, are willing to abandon their juggling mountebank whose pretensions would only excite a smile, were it not for the plorable results to which they give rise. Struck with this sad spectacle of human credulity and folly in cases in which such important interests are involved, legislators have thought that it was not sufficient to provide educated physicians, and to give the public the means of recognizing them, but have passed laws prohibiting all but regular physicians from practising. These laws are founded on the assumption, that it would be so absurd to have recourse for medical aid to an ignorant person, when it is possible to procure the services of an educated physician, that those, who might be tempted to do so, must be treated as incompetent to manage their own concerns. To prevent them, therefore, from indulging in such folly, all irregular practice is prohibited under certain penalties.

The laws for educating and organizing a body of physicians were intended to give men the means of acting prudently; the prohibitory laws were intended to compel men to act prudently. So long as public sentiment accords with this view of the legislator, the operation of these prohibitory laws is salutary; while only a very few silly persons prefer to have recourse to men out of the profession for relief, it seems proper to protect them against their own bad judgment, just as minors and imbecile persons are not allowed to make contracts by which they might be swindled by knaves. But unfortunately a large portion of the public think that education and science are not necessary to qualify men for medical practice. Numerous sects have sprung up, pretending to cure diseases by various processes, more or less ridiculous, but all agreeing in this one point, that it is not necessary to pass through the regular course of studies required by law, but that there is a royal road to medical practice which renders such drudgery useless. These sects, absurd as their doctrines may be, have succeeded in gaining followers among the public, and the effect of these restrictive laws, if enforced, must be to prevent all their followers from procuring the kind of medical aid which they prefer. Besides, it must be remarked that those who are thus placed under legislative tutelage, are not exclusively the ignorant or imbecile, but that they number in their ranks many persons of education and sagacity, who manage all their other affairs with sufficient acuteness and discernment. However absurd the opinions and conduct of these men may appear to us, we have not, for that reason, the right to impose on them our ideas of wisdom. If, for example, a full-grown man who is capable of managing his own business, chooses to call in, to reduce a dislocation, a natural bone-setter who avows that he has never seen a skeleton, in preference to a surgeon who has devoted himself to the study of such accidents, we may deplore his folly, and endeavor to persuade him to act more prudently, but we ought not to use compulsion either directly or indirectly. If his conduct is foolish, he alone suffers from it, and as we are not responsible for his folly, we have no right to prevent him from indulging in it.

On this point we have the misfortune to differ with some for whose opinions we have great respect, and we wish to be well understood. None can be more deeply impressed than we are with the immense amount of mischief inflicted on community by irregular practitioners of medicine. We feel indignant at the base deception they daily practise under our eyes, and we pity their dupes. We all alike agree in deploring the evil, but there is some difference of opinion as to the remedy. The experiment of the past satisfies us that legislative wisdom never can restrain individual folly; that all that legislation can do in such matters is to give to all the means of knowing the character of those to whom they may apply, and thus enable them to act with a full knowledge of the circumstances, and leave the rest to each man's own wisdom and prudence. We are accustomed to apply this principle to other cases of a like nature. Absurd and mischievous religious systems sometimes spring up. We are pained to see men led away by vile superstitions, or fall victims to the arts of designing leaders, yet we do not attempt to put down such systems by law, because we do not think it right to impose our religious views upon others, and because we know that any such attempt would only serve to confirm them in error. So, too, in matters of ordinary business, the law protects men against imposition so far that if one, in making a bargain, is deceived by false representations, the law would give him redress; but if, with a full knowledge of the facts, one enters into a foolish bargain, he must abide by the consequences. There is no reason why the same principle should not be applied to medical practice.

But even admitting that these restrictive laws are founded on principles of sound policy and justice, there is still one objection which is unanswerable. It is entirely impossible in this country to enforce them. For many years they have been in existence, and yet men have practised under our eyes openly and avowedly in violation of them, and in no one instance has the penalty been enforced. As to the disability of recovering payment for their services by legal process, it has had quite as little influence, for we think it is altogether probable that botanic doctors, and homœopathists and other quacks, have been quite as well paid as the regular practitioners.

The practical operation of these laws was rather favorable to the class of irregular practitioners. The penalty they imposed was never regarded, the disability of collecting debts afforded a pretext for demanding payment in advance, and gave to their demands the character of debts of honor. Besides this, they put it in the power of quacks to raise a cry of persecution and represent the profession as greedy monopolists, and thus excite some feeling in their favor among weak and credulous people. A clamor for the repeal of these laws was kept up for the purpose of advertising the system rather than of obtaining any rights about which they really cared, and since the repeal has been obtained they will have to devise some new plan to wriggle themselves into notice.

It will be remarked, that in all our reasoning on this subject of these restrictive laws, we have considered them as designed for the good of the

public and not of the profession. This is undoubtedly the only ground on which they can be defended. The object of those who enacted them, was to protect the public against the ignorance and rapacity of quacks, and not to protect the profession in a monopoly of practice to be enjoyed for the benefit of its members. If, in the repeal of these laws, a wrong was committed, the public and not the profession must be considered the injured party. It behooves us neither to claim as a right nor to ask as a favor any exclusive privilege, which is opposed to or which is not directly conducive to the public good. If these restrictive laws are not called for from considerations of public safety, then there should be no opposition on our part to that repeal. It is certain, that no class of community are so little liable to be injured by quacks as physicians who know how to avoid them.

This point has been lost sight of in the discussions on the subject in the legislature and elsewhere, and we are anxious to bring it clearly in view, because it does not comport with the dignity of our profession to appear to be engaged in a selfish contest for privilege with the different bodies of quacks which infest the community. As the natural guardians of the public interests in such matters, it is incumbent on us to admonish the legislature, if we think they are acting ignorantly or rashly, but we must be careful to have it understood that in so doing we are not defending our privileges against the rest of the public, but that we are defending the public against their own rashness and folly.

To resume. We consider that the great end of legislation in medical practice should be to provide a body of competent physicians, and to give the public the means of recognizing them, leaving to the prudence of individuals to choose discreetly; and that all attempts to coerce people to discretion are wrong in principle and unsuccessful in practice.

We are now prepared to examine the question, whether under the circumstances any action of the Society is called for?

We have expressed our views as regards the restrictive laws. Whatever difference of opinion may exist as regards the general policy of such laws, there is one point on which all must agree. It is utterly impossible to enforce them so long as they are not in accordance with public sentiment. We would, therefore, be exceedingly sorry to see the profession again entering into a contest with Thomsonians and other persons of that class, for the sake of restoring a law which we know before hand cannot be executed, and which serves as a pretext for quacks of all kinds to raise the cry of persecution, and to represent the profession as made up of selfish monopolists—a contest in which defeat would be mortifying, and success would bring no real advantage.

We are aware that much feeling has been excited in the profession by the repeal of the laws, but this is owing rather to the manner in which it was effected and the ground on which it was urged, than to the act itself. Although it was sustained by some for proper reasons, yet a few senseless demagogues in the legislature, fit organs of the quacks, whose cause they espoused, did not fail to seize that occasion to revile the whole body of physicians, and to represent them as engaged in a struggle to maintain

a monopoly of practice in their own hands. The profession was thus placed in a false position; it appeared to be fighting for its privileges against the quacks; the interest of the public in the contest was kept out of view, and the result was hailed as a triumph of quackery over the medical profession. We hope that in future they will be allowed to enjoy their triumph without any interference on our part. We should be sorry to become engaged in a contest with ignoble adversaries for the benefit of a public which will always look upon our mediation with suspicion. Let the knaves and the dupes in future settle their accounts among themselves.

As regards the laws regulating medical education and the organization of the profession, we do not know of any modification which would be desirable. The State and County Societies have all the powers necessary to enable the profession to act with unity and efficiency. What is still wanting here, depends not on the legislature, but on ourselves. We ought to endeavor to infuse more spirit into our County Societies, to have more frequent meetings, and to promote cordiality of feeling among its members. The rules of medical ethics should be scrupulously observed, and any violation of them promptly noticed by the Society.

In the law of last winter, an amendment was offered requiring unlicensed practitioners to express their true character by having the word "unlicensed" on their signs. This amendment, to which no sound objection could be made, since it could only serve to inform the public of the true character of those who offered their services, and which, if one half was true of what was said in debate respecting the superiority of Indian doctors, homœopaths and steam doctors over the regular profession, would have conferred a real advantage on the unlicensed practitioners, was rejected. Although we think the amendment a good one, yet we should be sorry to go again before the Legislature to ask for its passage, and we think the same end might be attained if every County Society would publish in the newspapers semi-annual or quarterly lists of their members.

Now that all restrictions on practice are removed, it will be practicable to raise the standard of admission into the County Societies without exciting any well-founded opposition. These societies are now voluntary associations, into which those who find the requirements too high need not enter. A well-matured plan, which would increase the amount of requisitions without putting it at a point unattainable at the present time, would no doubt be favorably received by the profession.

We would then say, in conclusion, we have laws enough, and good laws. Quackery must be suppressed not by legislation, but by enlightening the public as to its dangers. The dignity and respectability of our profession is to be promoted not by asking for legal privileges, but by an increase of individual zeal and a more cordial co-operation. It is a great error to suppose that the repeal of the restrictive laws puts the physician on a level with the quack and takes away the barrier which separated them. The barrier which effectually separates the two classes is formed by the higher attainments and honorable deportment of the members of

the former, and this is the barrier which it depends on us to make higher and stronger. It is one which quackery will not surmount, and which legislative enactments cannot break down.

In accordance with these views, the committee offer the following resolution :—

Resolved, That in the opinion of this Society, it would not be conducive to the interest or respectability of the medical profession, at the present time, to apply to the Legislature for any alteration in the charters of the State or County Medical Societies ; or any legislation on medical subjects whatever.

THOMAS HUN,

JOEL A. WING,

MASON F. COGSWELL.

AN ESSAY ON THE HUMAN COLOR.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—In the following essay, I have attempted the solution of the problem of the human color. Goldsmith, and almost every other preceding as well as succeeding naturalist, has made a similar attempt. With what success, will appear from a perusal of their several systems of Natural History. Dr. John Mason Good in his Book of Nature has, at least, given us the opinion of the learned world upon this subject as it stands at the present time, but I think he has failed to unravel the mystic knot. Some notes were made by me upon this subject as long ago as the year 1825, with the view of answering certain queries contained in Mr. Jefferson's Notes on Virginia, but the completion of the design has been delayed until the present time.

Geographers have estimated the number of the human race to be 800,000,000. Of this number, 500,000,000 are of a black or blackish color, and 300,000,000 of a white or whitish color. There are on the earth five black or blackish men to three white men. Among the black men I include the Asiatics, the Australians, the Africans and the Indians of our own Continent. Naturalists have usually divided mankind into a number of varieties or species, but I shall consider them only under the common division of black and white.

Whence the color of the black man? says the European naturalist. Whence the color of the white man? says the Chinese philosopher. The Chinese is as much puzzled to account for the color of the white man, as the white man is to account for the color of the Chinese. The form, the features, the hair and the color of the white man are as curious and perplexing subjects of philosophical inquiry among the Chinese, as the personal peculiarities of the Chinese are among us. The black or blackish men of the earth everywhere regard their own color as the primary color of mankind, and all other colors derivations from it, for the same reason that we do, because being used to it, we like it the best. The color, figure and features of the white man are as strange and uncomely when first beheld by the Africans or Chinese, as their personal peculiarities are to us.

The Chinese suppose themselves to be not only the oldest and most civilized people of the earth, but to be superior in personal beauty and in knowledge. White people set up an equal claim. The whites admit no other standard, either of beauty or knowledge, than their own. The Chinese make themselves the only true standard, and for an equally good reason. The Chinese have never manifested any admiration, love or preference, for the color of the white man; nor been in the least disposed to imitate him either in his looks, color or personal appearance. A full proof that they are entirely satisfied with their own complexions and features. Indeed, being accustomed to see such a majority of people around them of their own color, a white man must be much more of an anomaly among them than one of them would be among us. It is only, then, at home, among his own color, that the white man enjoys his own sense of superiority in point of lineage, personal beauty and knowledge.

It is agreed, on all hands, that the color of the human race resides in a thin membrane composed of mucus, lying between two other thin membranes called cutis and cuticle, both of which last are white as well in black people as white people. It has been long settled, by the dissections of anatomists, and the observations and experiments of physiologists, that the color of the skin arises from the color of this membrane, called the rete mucosum. The scarfskin above and the true skin below this membrane, are both white in every individual of the human race. Anatomists and physiologists have traced the various shades of color which characterize individuals and nations of men, to this mucous substance placed between the scarfskin and the true skin. In men of a dark brunette complexion, this membrane is found to be dark; in those of a light complexion, it is light. In black men, it is black; and in copper-colored men, the rete mucosum is of a copper color. The mucus appears to be of the same nature in all; but its color is various, or varies from what is called a flesh color to a very dark brown or black; but it is never perfectly black, or so black as the color of many other objects. Indeed, a black person in a very black dress will appear by comparison to be much lighter than the dress itself. No observations or analysis have furnished any reason why the rete mucosum should in one man reflect the color of the European; in another, the color of the Chinese or American Indian; and in a third, should reflect scarcely any color at all, as in the African—for black, philosophically speaking, is no color, but an absorption of all the seven primary colors. But, here, in this mucous membrane, lies all the difference in the color of men, be it what it may; in an arrangement of the particles of matter too minute to be detected by the most powerful glass of the optician, too subtle for the nicest tests of the chemist. All the internal parts of the body, as well in blacks as whites, all the organs, tissues, membranes, muscles, nerves and bones, are of one and the same color. Wherever the mucous membrane becomes eroded or destroyed by the application of blisters or by ulceration, the part where the cicatrization takes place becomes perfectly white, as well in blacks as whites.

The coloring matter of the skin is no doubt the same as the coloring

matter of other objects in nature, which reflects a similar color. If a man were colored black or brown artificially, although it would greatly disfigure him according to our notion of things, it would not at all change his nature or his capacities. No more can we, philosophically, suppose the black man to differ from the white man, than that the white man would differ from himself before and after he became artificially colored, provided this color were indelible. So far, I mean, as color constitutes a difference.

The coloring matter of the black hair and black eyes of white people, is the same as that which colors the skin of black people, but no one supposes a white person any different in his nature, or inferior in personal beauty or in talents, for having black hair or black eyes. In many, not only the hair on the head, but over the whole body, the eye-brows, the eye-lashes and the beard, are of a black color, the amount of black being, sometimes, sufficient to color the whole skin of a large person. From this, we must infer that the mere color of the external parts of the body does not sensibly vary the nature of the individual.

If the human race ever were of the same color, that color can now only be reproduced by a composition of all the colors which diversify the complexions of mankind. By a composition of the color of the Chinese, of the European, of the African, and of the American Indian, a color would probably result very nearly resembling that of the inhabitants of Arabia. This color, then, if the species ever were of one and the same color, must have been that color. It is possible that the color of the whites may not be convertible into any other color, unless by commixture of blood. It is possible also that the color of the Africans may not be convertible into white, under ordinary circumstances, by any other process; and yet, a color resulting from a commixture of all the different colors of the race, be re-convertible into all the colors of which that color is composed. The supposition I wish to convey is this, that if the whole human species were uniformly mixed, as whites or as blacks are now mixed, a color would result which would be re-convertible into all the colors of which it was composed, whenever such a commixture ceased to exist; although neither of the extremes of such a color, which I suppose to be the color of the clear whites and the clear blacks, would be capable of such a re-conversion.

In the reproduction of the human species, two opposite tendencies are observable, the one to a similitude of form, features and color, and the other to a dissimilitude in the same respects. No two individuals, however closely allied by birth, present a perfect resemblance. Dissimilitude is a result as inevitable as a resemblance. A variation in the shape, in the features and in the color, is easily recognized in every family of children. A greater variation is observable between members of different families. And a still wider variation is observable between people of different nations and languages. The variation in shape, features and color, between the English and French people, is so remarkable as to designate them all over the world, wherever the two nations are known. The more a community of people intermarries with itself and separates

from every other community, the nearer it comes to a common resemblance in form, features and color; and the further it deviates from every other community in this identity of likeness.

These two natural tendencies, the one to similitude and the other to dissimilitude in the conformation of the human body, may be denominated the *physical latitude allowed by nature in the reproduction of the human species*. The same latitude is observable in the reproduction of every other species of animals; and even of vegetables. This latitude exists independently of all external causes. It results from the organization of the species.

In cases where a white man marries a black woman here, their children partake equally of the color of the father and mother. A color is reproduced, compounded equally of the color of the parents. The color is literally halved. But, at the same time, it must be remarked that no greater alteration has happened in the color of the skin, than in the form and features of the children. Both in the form and features of the children, the original dissimilitude of the parents is partially lost. The short curly hair and the broad flat features of the mother, and the long light hair and the narrow sharp features of the father, are equally divided in the children. If these children continue to marry only among whites, in a few generations, all traces of the African color as well as form and features are obliterated. The race has become white.

On the contrary, if a white man goes to Africa and marries a black woman there, and their children keep on mixing only with the blacks, the fourth generation will be complete Africans, with short, curly hair, black skins, and all the other peculiarities of form and of features, which characterize the African people; in a word, the white man is lost—his color, his form and his features have become divided and sub-divided until nothing is left. The race has become black.

In this illustration it will be noticed that the color of the skin is produced and obliterated in the same way with the form and the features. The color of the skin, then, evidently results from the *physical latitude allowed by nature in the reproduction of the human species*. The form, features and color of the African may be regarded as the terminating points of this latitude on the one hand; and the form, features and color of the whites, as the terminating points on the other. All the resemblances among the whites themselves, and all the differences between whites and blacks, must result from this latitude. The physical difference, then, between a black man and a white man, is of the same nature with the physical difference between any two white men, or any two black men, since the difference results from the same cause and is reducible by the same process.

If all the people of the earth, 800,000,000 in number, were to be arranged in a straight line as thick as they could stand, exactly according to their color, beginning from the whitest and ending in the blackest, it would be impossible to tell where the white race ended and the black began. We should find no line of demarkation between them. The white runs imperceptibly into the black. It is only by taking one from

either extreme that a difference is observed. But although we observe such a wide difference between the individuals taken from each extreme of this long line, the difference is of the same nature with all the lesser differences; it is completely annihilated in the course of the reproduction of the species, precisely like the smaller dissimilitudes.

Black and white are apparently extremes of the human color; as large and small, tall and short, are the extremes of the human size. All these peculiarities are determined in the reproduction of the individual.

[To be continued.]

EPIDEMIC ERYSIPELATOUS FEVER.—NO. IX.

By J. A. Allen, M.D., Middlebury, Vermont.

[Communicated for the Boston Medical and Surgical Journal.—Continued from page 443.]

AT what period shall Bloodletting be performed? In common cases of an inflammatory nature, either local or general, the earlier in the disease the sanguineous abstraction is made, the better; but in this disorder instances occasionally occur, in which no depletion of this kind may be required till several days after its regular progression. The demand for this remedial measure may then be produced by a re-percussion of the local affection to some vital or internal organ, inducing all the phenomena of hyperæmia, and require bleeding as much as sanguineous apoplexy of either the brain or lungs. These cases require the greatest caution and circumspection. They are liable to be mistaken for a collapse; a mistake which would be fatal.

CASE IV.—Mrs. Barrows, of a slender habit, on the fourth day of the disease had a metastasis from the throat to the brain and face. She experienced what she termed “a faintness at the stomach”—thought she required food; face erythematic, head oppressed, dull and heavy, not easily aroused, and then apparently only half conscious; tongue coated, dry; skin preternaturally hot—not intense; pulse 140 per minute, contracted, wiry. Sixteen ounces of blood were taken, when the pulse softened and became fuller. All the symptoms were mitigated. On the second, third and fourth days after, the same train of vascular excitement and local hyperæmia recurred, and at each time venesection subdued them. The face, whole scalp and neck became successively covered with erysipelatous inflammation and tumefaction. Alvine motions were daily produced by the use of calomel, and the cutaneous transpiration promoted by the use of antimonial powder, and the morbid sensibility allayed by the use of sulphate of morphine. The local irritation was in some degree mitigated by the application of a tepid solution of the nitrate of silver. On the eighth day, sulphate of quinine was administered to sustain the system, and on the ninth convalescence became established. Desquamation of the cuticle ensued over the head, face and neck. In this instance I had the aid of my friend, Dr. A. Hall, of New Haven.

V.—Mrs. Hammond, a near neighbor of Mrs. B., was seized with the complaint June 2d, 1842. At the onset there were the ordinary chills,

fever and internal affection of the throat. Without any very efficient medication the disease pursued its usual course, the local affection left the internal surface of the fauces and became distinct on the face and neck, and gradually, as usual, moving about. All the symptoms of the complaint were of a mild character till the night of the sixth day of the disease, when she became delirious, restless, and finally stupid. Early on the morning of the seventh day of her complaint I found her comatose; skin shrivelled, especially over the late erysipelatous manifestation on the face and throat; pallid; extremities cold; pulse moving over 140 per minute, soft, irregular. She was immediately put on the use of an aqueous saturated solution of cinchona with aromatics, alternated every hour with sulphate of quinine; stimulating applications were made to the surface, and the tincture of cantharides given as circumstances might require. This course was pursued for two days, and increased or diminished as the system became roused or sunken, when convalescence was established at or near the close of the ninth day from the accession.

These two instances present, in bold relief, the contrast in the pathological states of the system in which an analogous train of symptoms may exist, and may require a directly opposite mode of treatment for their successful removal. In the case of Mrs. B., to be sure, there was not such a degree of stupidity as in that of Mrs. H., and yet it is evident that in a few hours, without depletion, there must have been such an engorgement of the brain as to have rendered her equally comatose. In each case, the local translation was manifestly to the brain, and had it not been rebutted by the appropriate measures must have proved mortal. "*Nullum ego cognosco remedium, nisi quod tempestivo usu fiat tale.*"

VI.—Mrs. Allen, on the fourth day from the accession of the disease, had the local erysipelatous affection of the throat and face, without any obvious cause, change suddenly to the bowels. The abdomen became tense, extremely sensitive and painful. The pulse rose from 90 to 136 per minute, small, hard. In accordance with my own views and those of my medical friends and neighbors, Drs. E. Tudor and Z. Bass, twelve or fourteen ounces of blood were immediately drawn, anodyne fomentations applied to the bowels, and the usual antiphlogistic means used to promote perspiration. The symptoms were meliorated, but in twenty-four hours they again became more aggravated. The loss of ten or twelve ounces more of blood obviated the difficulty. *Ol. ricini* was used to excite the daily action of the first passages. Convalescence became established on the eighth day from the attack.

These cases are not brought forward as subjects of imitation without cautious scrutiny, but with a view to present in their true light two important remedial measures, when properly adapted to existing exigencies. Bloodletting in those instances of hyperæmia of any of the internal organs, especially when the disease is of an erysipelatous character, cannot be too highly prized. In the mean time, it cannot be too strongly impressed on the mind that congestion may take place from atony as well as from hyperæmia, and that in the former stimulation is as urgently demanded as depletion in the latter. In each of our erysipelatous epide-

mics, instances in which bloodletting has been indicated, compared with the many in which it has been neither required nor practised, have been few. And yet it is an obvious fact that some cases have been saved by venesection, without which death must have been the inevitable result. In my own person, in 1826, I was immediately relieved from the severity of the pain by its employment, and my friend, Dr. H. Hatch, of Burlington, experienced similar effects from its use in his own case in 1842.

Dr. Schedel, in Tweedie's Medical Library, on the treatment of erysipelas, makes the subjoined excellent practical remarks:—"Should the disorder be severe," he says, "bloodletting, local and general, emetics, purgatives and antimonials, must be employed as circumstances require, due regard being paid to the powers of the patient, and to the prevailing constitution. In general terms, bleeding to be serviceable must be practised boldly. In young and vigorous persons, affected with severe erysipelas of the face, venesection, and the application of from twenty to thirty leeches behind each ear, commonly produce the best effects; in cases of less severity, the bleeding may be dispensed with, and emetics, aperients and saline antimonial medicines employed."

Alteratives.—Many of my medical friends have been in the habit of commencing the curative process, in this disease, by the use of the combination of ipecacuanha or tartarized antimony with calomel, in sufficient quantity to produce free emetic and cathartic operation. This plan has much in its favor, and has often been attended with success. Its tendency is to equalize and induce a healthy action, to interrupt the forming disease, and to promote a salutary perspiration. To this scheme, if the complaint have not been arrested, has succeeded the ordinary use of mercurial alteratives, in combination with some antimonial or the compound powder of ipecac. The object has been to produce a constitutional impression and induce ptyalism, and by this means interrupt the disease. My views on the subject of shortening the regular duration of the complaint have already been given. The plan, however, I wish neither to commend nor condemn, in ordinary febrile action. I must honestly admit that my early anticipations of the influence of mercurial medicines over every species of general pyrexia, have not been realized. As early as 1815, when what was called bilious typhus, probably *typhoid fever*, was endemic, I lost several cases in whom ptyalism and general mercurial impression appeared to have been in a most favorable state. Since that time, numerous other similar instances have fallen under my observation, in which a mercurial action has proved ineffectual wholly to control the disease. The opinion advanced by Mr. T. Clark, in his observations on the fevers and diseases of the West and East Indies, will, when carefully tested by experience, be found generally correct. "Nay, it has often appeared to me," says he, "that when it (calomel) has removed the disease in the first instance, it has laid the foundation for a relapse which has proved fatal. The excessive debility occasioned by a violent mercurial course readily accounts to me for such consequence." Upon the same subject, Mr. Annesley, in his medical sketches of the East Indies, very appropriately remarks, "Those who prescribe five grains of calomel every

three or four hours, with a view of inducing the constitutional effects of mercury, *produce much greater irritation of the alimentary canal*, are longer in obtaining their object, and exhibit much more calomel for the removal of the disease, than those who give twenty grains only at bedtime, with a purgative in the morning, and a saline diaphoretic through the day. This latter dose acts as a sedative to the irritable stomach, while smaller doses increase the irritability of this viscus when it is present, and often induce it where it was previously absent." In my practice, in the late erysipelatous epidemic, I have not used mercurial medicines in more than half a dozen instances during its prevalence; in no case simply to obtain its alterative influence. In each case it has been used after the violence of the pyrexia had in a measure been subdued by previous depletion; and it has been exhibited to allay morbid irritability of the first passages, or to remove congestion of some organ. When used, calomel has been selected, and always given in full doses, and usually in combination with the sulphate of morphine.

[To be concluded in next No.]

SUDDEN ATTACK OF INSANITY, AND INSTANTANEOUS RECOVERY.

[THE following case is recorded by Dr. Brigham, of Utica, in his new "Journal of Insanity."]

Mr. ———, aged 48, had uniformly enjoyed good health until the summer of 1842, when he complained some of not feeling well, was weak and dyspeptic, and in November had what was supposed to be a slight paralytic attack. For this and severe pain of the head he was bled *seven or eight* times, took cathartic medicines and was blistered largely. He remained dull and disinclined to exercise for five or six weeks, when he became suddenly deranged. The immediate cause of his derangement was the entrance of a sheriff to take his property for debt.

Early in March, 1843, he was admitted into the Asylum. He appears idiotic, timid, thinks robbers are pursuing him; is inoffensive, and readily submits to whatever is requested, with the exception of being shaved, because, he says, "It will take away his strength, and he cannot consent to it until after the war is over."

The second day after his arrival, he was told in a decided manner by the physician that the war was ended. "Is it," says he, "what has General Jackson done with those rascals, hung them?" Answer, yes. "Hurrah, hurrah," he exclaimed, "that is right, I will now be shaved;" and readily and pleasantly submitted to have his beard of some six weeks' growth removed.

He had a warm bath, and as he was feeble and pale, he was put on an invigorating diet and the use of tonics. He took large doses of the precipitated carbonate of iron, combined with the extract of conium, three times a day, and his general health and appearance began to improve. His appetite became good, and he sleeps well. During the day

he amused himself by talking and laughing with other patients, and in playing cards and other games.

A few weeks after this he was invited into the office of the Superintendent, with whom he conversed some time in his usual disconnected manner, as if he did not know what he was saying, when looking around, he asked, "Was I ever in this room before?" He was told he was when he first came. He then asked, "What town is this?" Answer, Utica. After reflecting a short time, he remarked, "Then I am in the Lunatic Asylum I know." From that moment his mental powers were restored.

Instead of returning the same evening to the apartment he had occupied, he was placed in a different story of the building, and in the morning, when he was informed that he had heretofore occupied another, he was anxious to visit it, but on returning to it, he had no recollection of ever having been there before; and although he recollected his associates, he had not the least remembrance of anything he had said or done since he had been at the Asylum, until the evening alluded to. The last thing he recollected was the entrance of the sheriff, as we have mentioned. He was discharged well, and still enjoys good health.

Was not the delirium in this case produced by the excessive loss of blood? Cases somewhat analogous, and which may serve to elucidate this, may be found in Marshall Hall's "Researches relative to the Morbid and Curative Effects of Loss of Blood."

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, JULY 17, 1844.

Tubercular Leprosy in New Brunswick.—Mention was made in the Journal, some months since, of a species of leprosy in the British Province of New Brunswick. The only particulars then known of the disease were obtained from the papers of the day, and of course were anything but satisfactory to the medical inquirer. In the London Medical Gazette for June 14, is a communication drawn up by Mr. A. S. Skene, Surgeon of the Army, who was one of a commission appointed by the Lieut. Governor of New Brunswick to investigate the whole subject. Mr. S. satisfied himself that the disease in question was *tubercular leprosy*, or *elephantiasis* of the Greeks—the *lepra tuberculosa* of authors. He quotes the definition of the disease by Dr. Copland in his Medical Dictionary, and then reports several of the nineteen cases which came under his observation, to show the identity of the symptoms. The following is Dr. C.'s definition.

"Dusky-red or livid tubercles, of various sizes, on the face, ears and extremities; thickened or rugous state of the skin, diminution of its sensibility, and falling off of the hair, except that of the scalp; hoarse, nasal, or lost voice; ozæna; ulcerations of the surface, and extreme fætor."

The first case of the disease is said to have occurred in 1817, in a

married woman, which terminated fatally in 1829. Her husband took the disease three or four years before her death, and died in 1831. Since then, the disease seems gradually to have extended itself. Only 12 patients have as yet been known to die of the disease, and in the fatal cases reported death did not take place till six or eight years after the attack. In some cases but one in a family was affected, and in others there were more. Mr. S. supposes it has been communicated by hereditary taint and by contagion, though he thinks it is never likely to become epidemical. No *post-mortem* examinations have been made of those who have died. He knows of nothing peculiar in the climate, or the diet or habits of the people, which could be considered as contributing to the commencement or continuance of the disease. With regard to the treatment, we copy all the remarks made by him.

"This is either active, palliative, sanatory, or preventive. With regard to the two first, the commission did not feel authorized to offer any observation to the Government of New Brunswick; while in respect of the two latter, they unanimously recommended the erection of a lazaretto, strict seclusion of the lepers in this establishment, and legislative sanction for the removal of those patients who, while medical authorities were adjusting their differences, might introduce the seeds of a most loathsome malady into one of the most populous districts (Chatham) of this flourishing colony."

In the symptoms of the cases reported, there is in many instances a striking similarity to those mentioned by Kendall in his account of the Leper Hospital of Mexico, which may be found at p. 394 of this volume of the Journal.

The Eccalcobion.—The admiration of all classes of people has been wonderfully excited, in Boston and New York, with the results of this life-producing machine. Physiologists, we think, may profit by its developments. Those who have examined the celebrated plates of Mr. Hunter and some of the later writers, illustrative of the changes effected by incubation, and every one interested in natural history, would reap a great amount of satisfaction by visiting the Eccalcobion. Six eggs are every morning broken and displayed in saucers, where, by the assistance of good glasses, the incipient beginnings of life are manifested, from the first to the sixth day of incubation. By several visitations the process may be watched up to the twenty-first day, when the chick liberates itself from its prison, heavier than the whole egg was at first. In a few hours after exposure to the proper temperature, the small spot on the yolk of the impregnated egg, which contains the embryo of the future chick, may be observed by the microscope to be changing, a humid matter having formed within its limits. This change is more and more apparent, and increases in interest, during the whole process above mentioned. Whatever may prove to be the state of the body of the creature thus produced, as an article of food, and whatever change may be brought about by this artificial increase of nutriment for mankind, the process of incubation thus spread out before our eyes is of itself a most deeply interesting one, and should be examined by at least every medical man.

Transylvania Circular.—A quarto sheet, with the title in capitals like a newspaper, Vol. I., No. 1, is abroad. It is a novel mode, at least, of making up a prospectus, and will be likely to gain the attention of medical readers. Dr. Leonidas M. Lawson, editor of the *Western Lancet*, who resides at Cincinnati, has received the appointment of Professor of General and Pathological Anatomy and Physiology. Dr. Lotan G. Watson has taken the chair of Theory and Practice, recently vacated by Dr. Bartlett, now of the Medical School of Baltimore. Dr. James M. Bush takes the professorship of Special and Surgical Anatomy.

From the circular, it is apparent that the institution is as vigorous as ever, and contains as many elements of thrift and usefulness as at any period of its history. Not long since, there was a floating story that some difficulty existed in the board of faculty, that threatened the cohesiveness of certain functionaries; but there appears to have been more smoke than fire.

An impression is fast gaining upon the medical as well as non-medical public, that there are too many medical schools in this country. If they are all well sustained, and each endeavors to raise the standard of education, and pursues an unobjectionable system of instruction, the number is not too large. A neglect of that thorough course which can alone fit young men for the multiplied responsibilities of professional life, would be a valid argument against the operations of any one of the number now in legal existence. Population is increasing exceedingly fast in the United States; and although the professions are all overstocked in the old towns and cities, there are new States and territories where there is ample sea-room for thousands who have hardly entered upon the active business for which they were prepared. From a careful analysis of the present state of the schools, we are inclined to think that new ones will be chartered before any of the old ones are abolished. They will spring up in Iowa, Arkansas, Texas, and by-and-by raise their heads beyond the Rocky Mountains. With this prospect, it behooves those now enjoying a reputation to make renewed exertions for maintaining the character they have so justly accorded to them by a discriminating public sentiment.

Anatomical Atlas.—Some time ago mention was made of the commencement of an excellent publication bearing the above title, by Dr. H. H. Smith, of Philadelphia. It had then reached Part II., since which no further intelligence has been had of the work. The proposition was to complete it in five parts. We presume, therefore, the enterprise has been suspended by the publishers, for some good reason, for the present. If such is the fact, the genuine lovers of anatomical pursuits will regret it exceedingly. All the illustrations of Part II. were admirably executed, and with a fidelity that was calculated to make a great circle of friends for those most interested in its reputation.

While on the subject of anatomy, it strikes us that some one ought to prepare a pocket manual to explain the best methods of preserving preparations, wet or dry. Most of the better varnishes, now in use, offer little or no resistance to the tiny jaws of vermin; and with regard to glass jars, it seems almost impossible to seal them closely enough to prevent the escape of their fluid contents by evaporation.

Once more—there is much poverty of skill exhibited in dissecting rooms, in this country, in the preparation of bones. They are neither white nor free from an oily feeling, which never appertains to those brought from France. Perhaps skeletons and morbid specimens are better prepared in Paris than anywhere else. This may be the result of reducing the business to a regular system. Dealers in bones must put them in first-rate condition, if the character of the market is to be established.

Journal of Insanity.—In a preceding page will be found an extract from the first number of a periodical with this title, published in Utica, N. Y., under the superintendence of the officers of the State Lunatic Asylum in that city. It is to be published once in three months, each number containing 96 pages, at \$1.00 a year. It is in good hands, and we most heartily wish it success. The following "Notice" will explain the object of the Journal.

"The object of this Journal is to popularize the study of insanity—to acquaint the general reader with the nature and varieties of this disease, methods of prevention and cure. We also hope to make it useful and interesting to members of the medical and legal professions, and to all those engaged in the study of the phenomena of mind.

"Mental philosophy, or metaphysics, is but a portion of the physiology of the brain; and the small amount of good accomplished by psychological writers, may perhaps be attributed to the neglect of studying the mind, in connection with that material medium which influences, by its varying states of health and disease, all mental operations.

"We regard the human brain as the *chef d'œuvre*, or master piece of creation. There is nothing that should be so carefully guarded through all the periods of life. Upon its proper development, exercise, and cultivation, depend the happiness and highest interests of man. Insanity is but a disease of this organ, and when so regarded, it will often be prevented, and generally cured, by the early adoption of proper methods of treatment."

New Medical Catalogue.—A very complete and comprehensive catalogue of all the new publications on medicine, surgery, anatomy, midwifery, materia medica, medical jurisprudence, &c., has been issued by Messrs. Ticknor & Co., which will be of much service to the profession. It gives the exact titles, the number of volumes by the same author on any particular subject, and, in a word, explains just what a stranger wishes to know, who is about making a purchase. The more freely they distribute this catalogue, the better it will be both for the house and the buying public.

Dr. Bell's Select Medical Library.—The No. for July comes to us with enlarged dimensions—a volume of over 500 pages—comprising the whole of Dr. Robert's Lee's valuable Lectures on the Theory and Practice of Midwifery, delivered in St. George's Hospital, London. These lectures were first printed in the London Medical Gazette, but were revised by the author for a separate edition, from which the present is strictly copied.

St. Louis Medical School.—The annual announcement of the Medical Department of the St. Louis University is before us. The faculty is now complete, and a favorable representation is given of the advantages possessed by the School for imparting medical instruction. At the commencement in February, the degree of M.D. was conferred on nine graduates, and the honorary degree on Howard Watts, of Madison, Indiana; and John H. Polin, of Springfield, Kentucky.

Insane Poor of Connecticut.—We are gratified to learn that the Connecticut Legislature have made further provision for the insane poor of that State. Resolutions have passed both Houses, authorizing the Governor as Commissioner to make a contract with the Insane Retreat at Hartford, for the reception of insane poor persons whose parents or guardians are not able to bear the expense; and to appropriate hereafter \$5000 per annum.

On Strangulated Hernia.—A man, ætat. 28, was affected with strangulated hernia; during three days, various remedies were employed to facilitate reduction, but without effect, and the characteristic vomiting had already appeared. In this dilemma, Dr. Schulze, of Spandau, prescribed: pulv. ipecacuanhæ grs. v., to be taken every half-hour; after the administration of a few doses, the hernia was easily reduced.—*London Medical Times.*

TO CORRESPONDENTS.—Dr. Comstock's paper on Consumption, Dr. Haynes's report of the case of Dr. Prescott, Dr. Tabor on Tobacco, Dr. Lacombe, of Puerto Cabello, on Smallpox, Dr. Stevens on the use of Belladonna, and Dr. Dillingham on Anomalies of the Teeth, have been received.

MARRIED.—In Philadelphia, Francis H. Gray, M.D., of Boston, to Miss H. Regina Shober, of P.

Number of deaths in Boston for the week ending July 13, 31.—Males, 15; Females, 16. Stillborn, 4. Of consumption, 2—dropsy in the brain, 1—lung fever, 1—drowned, 1—typhus fever, 2—scarlet fever, 6— inflammation of the bowels, 1—anaemia, 1—brain fever, 4—infantile, 3—intemperance, 1—tubercular disease of the brain, 1—child-bed, 2—dropsy, 1—liver complaint, 2—debility, 1—erysipelas, 1—old age, 1—disease of the kidneys, 1—unknown, 1.

Under 5 years, 14—between 5 and 20 years, 2—between 20 and 60 years, 14—over 60 years, 1.

REGISTER OF THE WEATHER,

Kept at the State Lunatic Hospital, Worcester, Mass. Lat. 42° 15' 49". Elevation 483 ft.

June.	Therm.	Barometer.	Wind.	June.	Therm.	Barometer.	Wind.
1	from 54 to 74	from 29.36 to 29.45	S W	16	from 50 to 75	from 29.50 to 29.68	W
2	56 72	29.33 29.36	S W	17	55 75	29.39 29.44	S W
3	55 69	29.39 29.45	N E	18	64 72	29.29 29.34	S W
4	44 68	29.49 29.51	N E	19	65 87	29.26 29.32	S W
5	54 70	29.44 29.53	S W	20	68 80	29.21 29.30	W
6	52 73	29.32 29.39	S W	21	64 77	29.30 29.35	N E
7	64 72	29.22 29.35	N W	22	59 61	29.11 29.30	N E
8	54 66	29.29 29.56	N W	23	56 74	29.21 29.37	N W
9	53 65	29.13 29.48	S W	24	58 80	29.30 29.38	W
10	57 68	29.21 29.27	W	25	66 85	29.27 29.30	S W
11	44 64	29.41 29.61	N W	26	68 87	29.30 29.40	S W
12	44 71	29.70 29.75	N E	27	70 81	29.37 29.39	N E
13	50 69	29.63 29.75	S W	28	70 88	29.25 29.30	S W
14	53 72	29.54 29.59	N E	29	57 70	29.37 29.54	N W
15	50 74	29.73 29.78	N E	30	51 72	29.59 29.63	S W

Range of Thermometer, from 44 to 88. Barometer, from 29.11 to 29.78. Amount of Rain, 1.32 inches. Frost on 12th.

The Modern Metempsychosis.—"Well, and the souls of unworthy practitioners, what becomes of them?" It was thus that I was interrupted in the exposition of my system of cosmogony by my friend Bennet; and I will own I was gruelled by the question; for I found these souls even as difficult to dispose of in the other world as they are in this, and in my system of cosmogony I had not thought of the destination I should give to the souls of ignorant and unworthy practitioners of physic, of charlatans, and of those who live upon the credulity of mankind. But in a true system—and I hold mine to be incontestable—all the details come with the aid of a little reflection to range themselves harmoniously together; and having rubbed my brow for a moment, and scratched my ear, I delivered myself thus: The souls of unworthy practitioners, my dear Bennet, pass into the bodies of the animals which M. Magendie tortures and cuts up alive in his physiological experiments. This expiation appears to me most logical and legitimate; you may be certain that the dog whose sensible nerves the professor of the College of France is now busy pinching and pulling, the rabbit whose spinal marrow has just been exposed, and the guinea-pig whose chest, laid open, permits the palpitation of the heart to be seen, were so many unworthy practitioners of the by-gone ages, who now expiate their barbarities, their effrontery, and their cupidity; all their cries of suffering are but accents of contrition and of imprecation vented by their souls upon the rack. Ah, Messieurs les Charlatans! you that were and are materialists, without faith, without religion, without morals, without probity, because you acquired ample riches by indefensible means, and enjoyed your good fortune grossly, you thought yourselves beyond the reach of punishment! No, no, sooner or later, one day or another, frog or salamander, guinea-pig or dog, your feet nailed to the table, another Magendie will hold you under his scalpel, will pinch and irritate your nerves, cauterize your plexuses, pierce your ganglions, and galvanize your muscles! And you, gourmand, you that make a god of your belly, to which you sacrifice all that is noble in human nature, beware! I see another Orfila in perspective infusing some abominable drug or deadly poison into your stomach, tying your œsophagus, and, watch in hand, counting the minutes and the moments of your tortures! Beware, I say!—M. RAIMOND, in *Gazette des Hopitaux*.

A New Method of making Pressure in Uterine Hæmorrhage.—An anonymous correspondent of the Provincial Medical Journal thus writes:—"I found my patient (a delicate lady, with her seventh child) in a state of syncope; some large conglobula were discharged in the bed, and the uterus was expanded to full half its size before delivery. Fortunately, the nurse and sister were both women of firm minds; one forced some brandy into the mouth, while the other applied stimulants to the nostrils. I immediately passed my left hand into the uterus, and emptied it, while with my right hand I made pressure externally; contraction took place, and my patient rallied. I now took out my *new-fashioned bandage*, 'Salmon and Odys's patent single truss,' and applying the circular pad to the abdomen, and the other to the spine (reversing the usual method), outside the clothes, I made a firm and most agreeable pressure, which was continued for several hours, to the great comfort of my patient.—*London Medical Times*.